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An opus magnum of homoeopathic materia medica by Dr. TF Allen

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Abstract

This article is a small attempt to explore the unrevealed areas of the largest work in Homoeopathic materia medica, enlightening the plan, construction and arrangement of The Encyclopedia of Pure Materia medica by T.F. Allen. This book provides information on the positive effects of drugs upon the healthy human organism and a complete record of these effects, which is to be known by every physician and student in the field of Homoeopathy. These symptoms are recorded as purely as truth, which during the verification of their action, will remain the same and produce similar effects with increasing genuinity and authenticity.

Keywords: Homoeopathy, T.F. Allen, Materia medica

Introduction ^[1, 2]

In Westminster, Vermont of London, Timothy Field Allen (T.F. Allen) was born. He attended Amherst College for his undergraduate studies before earning his medical degree in 1861 from New York University. Along with Dr. P.P. Wells, he explored homoeopathy and collaborated with Dr. Carroll Dunham. At the New York Homoeopathic Medical College, Dr. Allen was hired in 1871 as a professor of materia medica. As a surgeon and professor at the New York Ophthalmic Hospital at the time, Dr. Allen oversaw its transformation into a homoeopathic institution before going on to become the faculty's dean. Dr. Allen spent 40 years of his life perfecting the homoeopathic art and science. On December 5, 1902, he passed away.

TF Allen's major works ^[2]

1. The Encyclopedia of pure materia medica (1874)
2. Boenninghaussen's therapeutic pocket book (1861)
3. Homoeopathic calculator from BTPB
4. Handbook of materia medica and Homoeopathic therapeutics (1889)
5. A Primer of materia medica (1892)
6. Ophthalmic Therapeutics (1874)
7. The Symptom Register (1880)
8. Pocket Characteristics (1894)

The Encyclopedia of Pure Materia medica ^[1-2]

The effects of medicines on a healthy human body are documented in the Encyclopedia of Pure Materia medica. It has only been focused on Hahnemann's pathogenesis. This book was edited and took over 10 years for Dr. T.F. Allen to compile.

Other contributions to this work were given by:

- i. Dr. Richard Hughes, of England
- ii. Dr. Carroll Dunham, of New York
- iii. Dr. C. Hering, of Philadelphia
- iv. Dr. AD. Lippe, of Philadelphia

Aim of the book

a.) The primary goal of this work is to present a reliable and precise description of the effects of drugs on a healthy human body (except for pathological anatomy).

b.) When read and reinterpreted with growing clarity and accuracy, the symptoms will always remain the same despite the interpretation of their physiological action being as certain to alter as physiology is to advance.

Preparation of the book ^[2]

A huge amount of literature has been searched that the work may be complete and reliable. Three sources helped to compile it which are:

- First: experiments were made on healthy individuals to note the effects of drugs.
- Second: reactions recorded after ingesting toxic quantities (accidentally or maliciously administered).
- Third symptoms (cautiously admitted) A "very few" symptoms that have never been noticed as effects of drug activity but have been so consistently confirmed clinically that they point to the cure must be added to those that are detected in the ill after the administration of the drug. A little cipher ^(o) is used to designate them following the symptom.

Translations ^[1-2]

The translation procedure preserved the original text's intended meaning. While translations were accurate, the phraseology was kept to alter them as little as possible and avoid endangering the way symptoms or repertoires are already used.

The translator of these terms was chosen after numerous comparisons and discussions with German experts. The editor has been continuously adding to the limited vocabulary text for several years, which consists of the

terms that are obscure and are usually employed in symptom description. A glossary of terminology that was published in the "Vierteljahrschrift" was quite helpful, especially when it came to the topic of provincialism. This section of the text will be illustrated by a few excerpts.

Example:

- **MATT:** A feeling of weakness and weariness (weary, like Mude), albeit not a true lack of strength like Schwach.
- **Frost:** Cold. (Coldness that is more intense than Kalte; A feeling that is more personal or interior.)
- **SCHLUND** – The whole internal throat; Schlund – KOPF, pharynx.
- **Angegriffenheit:** Mental dejection; physical prostration or weariness (Compare Mattigkeit.).

Dr. George L. Freeman - translated nearly all French provings. Dr. HM Smith - completed its recent Homoeopathic literature files by using his invaluable library of English.

Dr. St. Clair Smith has very efficiently assisted in the verification of the work progress through the press.

Construction of the book ^[1-2]

This book has 12 volumes of which 10 volumes consist of the action of drugs upon the healthy human organism and there effects, the 11th & 12th volumes consist of an index to "The Encyclopedia of Pure Materia medica". Total medicines described are 757+284 supplementary = 1039. The first edition of the book was published by Boericke and Tafel. Details of volumes are in [Table 1].

Table 1: Details of volumes

Volume	Alphabet	Medicines	No. of Medicines	Year of publication	Content in different volumes ^[2]
I	A	<i>Abiescan. to Atropine</i>	106	1874	i) Remedies list along with page no. ii) Book introduction iii) Materia medica part
II	A – C	<i>Aurum – Carduus</i>	74	1875	i) Remedies list along with page no. ii) Materia medica part
III	C	<i>Carlsbad - Cubeba</i>	73	1876	i) Remedies list along with page no. ii) Materia medica part iii) At the end Notes and corrections part is given
IV	C – H	<i>Condurango - Hydrocotyle</i>	113	1877	i) Remedies list along with page no. ii) Materia medica part
V	H – L	<i>HCN - Lycopersicum</i>	83	1877	i) Remedies list along with page no. ii) Materia medica part
VI	L – N	<i>Lycopodium - Niccolum</i>	72	1877	i) Remedies list along with page no. ii) Materia medica part
VII	N – P	<i>Nicotinum - Plumbago</i>	63	1878	i) Remedies list along with page no. ii) Materia medica part
VIII	P – S	<i>Plumbum - Serpentaria</i>	69	1878	i) Remedies list along with page no. ii) Materia medica part
IX	S – T	<i>Silicea – Thuja</i>	50	1879	i) Remedies list along with page no. ii) Materia medica part
X	T – Z	<i>Tilia - Zizia + supplementary part</i>	51	1879	i) Remedies list along with page no. ii) Materia medica part iii) At the end Notes and corrections part is given
XI	Index A - J	Symptom Register		1880	i) Introduction part ii) From Abies Canadensis (Ab. C) to Zincum Sulfuicum, medications are abbreviated (Zn. S) iii) From "A to J" Index The index begins with the heading Abandoned and concludes with the heading Jumping (see springing).
XII	Index K - Z	Symptom Register		1880	An index from "K to Z" starting with kicks and ending with ZYGOMA is included in this volume.

Table 2: Scheme ^[3]

<p>1. Mind</p> <p>I. Emotional a. Rage, fury, etc. b. Desires and aversions c. Moods 1. Laughs or weeps 2. Sadness, anxiety, fear. 3. Changing mood 4. Indifference</p> <p>II. Intellectual a. Thought b. Memory c. Cognition</p>	<p>2. Head</p> <p>I. Confusion and Vertigo II. Sensations (in general) a. Burning b. Bursting c. Constrictive: Cramping, Squeezing, Pinching, etc. d. Dull: Aching, Beating, Boring, etc. e. Sharp f. Sore g. Throbbing III. Sensations (local) Forehead (burning, bursting, etc.) Temples Vertex Parietals Occiput External head 1. Eruptions, Etc. (Objective). 2. Sensations (subjective).</p>	<p>3. Eye</p> <p>I. Eye In General. A. Objective General appearance. Motions. Twitchings, etc. B. Subjective (general sensations). II. Eye Locally A. Orbit B. Lids C. Lachrymal Apparatus D. Conjunctiva E. Ball (sensations) F. Pupil G. Vision 1. Acute or impaired. 2. Photophobia 3. Distorted 4. Illusive</p>	<p>4. Ear</p> <p>I. External Ear. a. Objective b. Subjective II. Hearing a. Acute or impaired b. Illusions of hearing</p>
<p>5. Nose</p> <p>I. Tissue a. Objective (including discharges) b. Subjective. II. Function A. Smell acute or impaired. B. Illusions of smell.</p>	<p>6. Face</p> <p>I. Face In General a. Objective (appearance, color, etc.). b. Subjective II. Face Locally. a. Cheeks and upper jaw b. Lips c. Chin and lower jaw</p>	<p>7. Mouth</p> <p>I. Teeth (objective and subjective). II. Gums III. Tongue IV. General Mouth V. Saliva VI. Taste VII. Speech</p>	<p>8. Throat</p> <p>I. Objective and Subjective. II. Throat Locally. a. Uvula. b. Tonsils. c. Fauces and Pharynx. d. Swallowing. III. Throat Externally</p>
<p>9. Stomach (Function)</p> <p>I. Appetite. Acute or impaired. Perverted. II. Thirst. Acute or impaired. Perverted. III. Eructations. IV. Hiccough. V. Nausea. VI. Vomiting. Stomach (locally), objective and subjective.</p>	<p>10. Abdomen</p> <p>I. Hypochondria. II. Umbilical And Sides. III. General Abdomen. IV. Hypogastrium and Iliac Regions.</p>	<p>11. Rectum and Anus</p>	<p>12. Stool.</p> <p>I. Diarrhoea. a. Character b. Conditions c. Concomitants II. Constipation</p>
<p>13. Urinary Organs</p> <p>I. Bladder (And Kidneys). II. Urethra (Discharges and Sensations). III. Micturition IV. Urine</p>	<p>14. Sexual Organs</p> <p>I. Male. a. Penis. b. Scrotum and Testicles. c. Sexual Desires. II. Female. a. Uterus and Ovaries. b. Vagina (Discharges and Sensations). c. Menstruation. 1. Early 2. Late d. Sexual Desires.</p>	<p>15. Respiratory Organs</p> <p>I. Larynx, Trachea, and Bronchi. II. Voice. III. Cough And Expectoration. IV. Respiration</p>	<p>16. Chest</p> <p>I. In General (Objective and Subjective). II. Locally a. Front b. Sides</p>
<p>17. Heart and pulse</p> <p>I. Precordium. II. Heart action. A. Rapid. B. Slow C. Irregular III. Pulse</p>	<p>18. Neck And Back.</p> <p>I. Nape of Neck. II. Back (General). III. Back (Local). A. Dorsal B. Lumbar C. Sacral</p>	<p>19. Extremities in general (Objective and subjective; no skin symptoms).</p>	<p>20. Superior Extremities</p> <p>I. In General. II. Local. A. Shoulder. B. Arm. c. Forearm, Etc.</p>
<p>21. Inferior extremities</p>	<p>22. General Symptoms</p> <p>I. Objective (Motion). a. Spasms, Etc. b. Paralysis. II. Subjective (Sensation). a. Acute. b. Impaired. c. Pain.</p>	<p>23. Skin</p> <p>I. General (Appearance, Color, Etc.). II. Eruptions. A. Dry (General and Local). B. Moist (General and Local). C. Pustular (General and Local). III. Sensations (For Sensibility,</p>	<p>24. Sleep and Dreams.</p> <p>I. Sleepiness. II. Sleeplessness. III. Dreams</p>

	1. Burning. 2. Bursting. 3. Constrictive. 4. Dull. 5. Sharp. 6. Throbbing	See Generalities.)	
25. Fever. I. Chilliness. A. General. B. Partial. II. Heat. A. General. B. Partial. III. Sweat A. General B. Partial	26. Conditions. I. Aggravations. a. Time. b. Circumstance. II. Ameliorations		

Arrangement [1-2]

The drugs have been arranged alphabetically separating even *Atropine* and *Belladonna*. The satisfactory or scientific categorizing of drugs possibly had been done by general impact they have on the human organism.

At the starting of each proving authorities are given and a small number is given following each symptom to refer to the list of authorities so that symptoms can be traced promptly, and according to its authority credence can be placed upon the symptoms, the dose that caused it, or the moment it happened, brackets are given after the symptoms stating the time (when noted by the provers).

Anatomical schema is strictly followed in the arrangement of symptoms. According to general principles which are followed in any part where sub-grouping has been done:

First of all, general symptoms are not always localized.

Localized symptoms are the second.

Objective and subjective symptoms have been given more attention and whenever possible the objective appearance of a part is given first, and subjective sensations have been given afterward. Symptoms indicating increased activity or action are given first; those denoting loss of action or function and depression follows after.

- A brief description of the nature of each author's observation was attached by Allen, which generally demonstrates the significance of symptoms drawn from that source.
- To distinguish symptoms from Hahnemann's symptoms, all doubtful symptoms were bracketed squarely [].
- [t] Is marked for toxicological symptoms.
- A pellet/Cipher [°] is marked for verified clinical symptoms.

Verification credit goes to Dr. Carroll Dunham and Dr. Adolph Lippe.

- (*) before symptom - Symptoms that the medicine has consistently cured are denoted by a (*) in italics or full-face type.
- Symptom in italics without (*) - repeatedly observed but not verified upon sick.
- Dr. C. Hering brought to the notice of the editor the original text contained some proving's typographical and other errors.

Scheme [3] [Table2]

Index of the Encyclopedia [2]

- With the exception of Wolf's "proving" of Thuja and

Houat's "provings" of Anantherum, Curare, Bufo, Cubeba, Piper NIG., Kali iodatum, and Sarracenia, the index concentrates on everything else. These were left out because the aetiology seemed suspect.

- The order is alphabetical, with the affected component listed first and the sensation, altered, or conditioned listed second.
- At the end of Volumes III and X, all corrections mentioned in the work have been provided. Aethusa, Aconitum, and Hypericum were listed in the addendum to Volume X's updated pathogenesis.

I. Location: In the Index part affected will be searched by its first letter. For example, symptoms of the brachialis muscle will be found under "B".

II. Sensations: The ability to differentiate sensations varied from prover to prover and among patients, one the cutting pain may be felt by others as stitching pain. "The sensations and pain were used as synonymously"-Allen. Example: Cutting sensation and cutting pain means the same, so placed undercutting only. Alphabetical arrangement of sensations under many headings and were allocated with many cross-references.

III. Conditions and Peculiarities: Conditions and peculiarities will be found under each sensation. The conditions are arranged in three sections and are given first.

A. General conditions: First – Time; arranged by the hour of the day and night, second– Circumstance; are arranged in alphabetical format.

B. Aggravating conditions: First time is given; second incident of occurrence is given.

C. Ameliorating conditions: Again, first time is given and second incident of occurrence is given.

Medicines detected under the conditioned sensation are not detected under the unconditioned sensation, although amelioration and aggravation repeats the medicines in the unconditioned section also.

For instance, the drugs mentioned under night-time aches won't be found under general aches. While drugs for aches that alleviate (>) or worsen (<) at night can also be found under general aching.

After an unmodified sensation, for instance, the unusual sensation is arranged alphabetically. Back pain is the first condition that all pain medicines are listed with, followed by all the unusual aches that are alphabetically sorted, each with its conditions. All variations to the baseline expression,

including course and orientation (always under the initial region), sensation alternations, etc., will be found among these peculiar sensations. Allen intended to include a chapter on conditions in the index, but the work's enormous size made it difficult to organize them efficiently. This will be accomplished in a distinct work that will be titled "Book of Conditions." He concluded by saying that since our understanding of how drugs affect health is limited, we must rely on clinical conditions. The clinical repertory, which incorporates such indications, is advised in that situation.

Merits ^[2]

1. Allen credits Dr. Richard Hughes, Lippe, Hering, and Dunham for helping him in compiling the record of the symptoms.
2. In The Encyclopedia of Pure Materia medica, for each remedy, the substantial symptoms were headed by the prover's name, the reference for the symptom, and the dosage which produced that symptom.
3. Encyclopedia by Allen is considered an important reference book for modern homeopaths.
4. The symptoms were documented in the true words of the prover. Also, other sources like accidental poisonings were included.
5. A vast amount of literary work was sought to make this work more genuine and wholesome.
6. In the heading "authorities", a concise statement about the nature of his observation is affixed with the heading, along with the significance of derived symptoms from that source.
7. The Materia medica index serves as a repertory.
8. Provings and clinical notes were added from the work of 10 years along with the cases of poisonings.
9. Lacuna from the 'Encyclopedia' was amended and flaws rectified.

Demerits ^[2]

1. The Encyclopaedia was called "Dr. Allen's gigantic and most disreputable work" in a review published in the Homeopathic Times in December of 1879. It called the work "a heap of trash, of symptoms which seem to have been assembled aimlessly from every language under heaven, from every mental hospital in the country, and from nurseries where tender mothers take seriously the symptoms and sayings of their young progeny"
2. An analytical revision of The Encyclopedia of Pure Materia medica was published by Allen in 1881, which included the revisions to remedies from Agaricus to Carbo vegetables. There was nothing similar to the rest of the remedies in the Encyclopedia that he published.
3. "Dr. Allen's work is an unrevised edition of the Homoeopathic Materia medica, it lacks reliability" – Hughes.
4. Proving of "Lacs" by Dr. Swan has not been included for publication.
5. Dr. Allen has worked with doubtful material very often in previous volumes.
6. The Imponderabilia section was not compiled in a suitable pattern.
7. Although they weren't completely excluded in earlier volumes, clinical manifestations disappeared when the drugs they were placed under were used. However, this text did not frequently employ such signs.

Discussion

In preparation of "The Encyclopaedia of Pure Materia medica", the aim was to assist in making a firm foundation upon which Homoeopathic therapeutics can rest. The student of materia medica feels confident that no quoted symptom of Hahnemann's stands unproved and that none of his work remains unverified. Along with that acknowledgment of the nature of Hahnemann's work and its probable value is well recognized through this work. No one individual could have completed the task alone, that this work has demanded in a constrained amount of time. The accuracy, authenticity, and completeness offered by this work will in the future help our profession by the means of effectual healing and relieving the sufferings of mankind.

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